Remarks

Claims 1 - 22 remain pending in the application. Claims 8 through 12 are canceled. Claims 1, 8, 17, 19 and 21 are amended.

The Application is subject to nonstatutory obvious-type double patenting rejections. Appropriate terminal disclaimers are filed with this response. Withdrawal of these rejections is respectfully requested.

The Office Action rejects claims 1, 19, 20 and 21 as obvious over Mollenauer, Resuscitation Device, PCT Patent Application Publication W099/09929 (Mar. 4, 1999) in view of Meister, Artificial Respirator, U.S. Patent 2,486,667 (Nov. 1, 1949) and Bastyr, Orthopedic Brace having a Pneumatic Pad and Associated Pump, U.S. Patent 5,520,622 (May 28, 1996) under the assertion Meister teaches a belt adapted to extend around the chest of the patient including the compression pad. It is asserted by the Office Action Meister appears silent with regards to the composition of the pads, but the details are well within the realm of the artisan of ordinary skill. The Office Action also contends it would have been obvious to one of ordinary skill to modify Mollenauer to include pads as taught by Meister to help cushion the compression forces and use the bladder taught by Bastyr.

Claim 1 is amended to include the claim limitation of a belt disposed around the patient and then around the spindle disposing the spindle between the belt and the patient. The combination of Mollenauer, Meister and Bastyr fails to teach or suggest disposing the spindle between the belt and the patient.

As seen in Figure 4 and Figure 5 of Mollenauer, the belt is disposed above the guide spindle placing the belt between the spindle and the patient. The spindles 19 or guide rollers in Mollenauer are used to provide for alignment and low friction feed of the belt. In contrast to Mollenauer, the Applicant's spindles are used to direct compression force to maintain the thorax in a somewhat oval cross section and compress the chest in the front to back direction. This form of compression is referred to as anterior-posterior compression or sternal compression. The shape of the compressed torso is urged toward a flat ovoid shape and away from the rounder, more circular shape of the torso. Claim 1 is further amended to dispose the bladder between the belt and the sternum of the patient. combination of Mollenauer, Meister and Bastyr also fails to teach or suggest disposing the bladder between the belt and the sternum. Because the combination of Mollenauer, Meister and Bastyr fails to teach or suggest at least one limitation claimed by the Applicant, it does not render obvious the Applicant's claimed invention.

Claims 19, 20 and 21 as amended claim, inter alia, compressing the chest of the patient with an anterior-posterior compression. The combination of Mollenauer, Meister and Bastyr fails to teach or suggest compressing the chest of the patient with an anterior-posterior compression. The embodiments disclosed in Mollenauer and Meister perform circumferential compressions and do not compress the chest in an ovoid shape. Because the combination of Mollenauer, Meister and Bastyr fails to teach or suggest compressing the chest of the patient with an anterior-posterior compression, it does not render obvious the

Applicant's claimed invention. Therefore, withdrawal of this rejection is respectfully requested.

Claim 17 is rejected as obvious over Mollenauer or Sherman, Modular CPR Assist Device, U.S. Patent 6,066,106 (May 23, 2003). The limitations of claim 17 now include compressing the chest of the patient with an anterior-posterior compression. The embodiments disclosed in Mollenauer and Sherman perform circumferential compressions and do not compress the chest in with an anterior-posterior compression into an ovoid shape. Because the combination of Mollenauer, Meister, Bastyr and/or Sherman fails to teach or suggest compressing the chest of the patient with an anterior-posterior compression, it does not render obvious the Applicant's claimed invention. Therefore, withdrawal of this rejection is respectfully requested.

Claims 8, 10, 11 and 12 are rejected under 35 U.S.C. § 102 as anticipated by Mollenauer. Claim 8 is amended to include the claim limitation of a belt disposed around the patient and then around the spindle disposing the first spindle and second spindle between the belt and the patient. Mollenauer fails to disclose, teach or suggest disposing the first spindle and second spindle between the belt and the patient. In contrast to Mollenauer, the Applicant's spindles are used to direct compression force to maintain the thorax in a somewhat oval cross section when compressing the chest in the front to back direction. Claim 8 is further amended to claim the belt can compresses the chest of the patient with an anterior-posterior compression. Mollenauer does not disclose using an anteriorposterior compression. Because Mollenauer fails to disclose at least one limitation claimed by the Applicant, Mollenauer does not anticipate the Applicant's claimed invention.

Claims 8, 9, 10 and 11 are rejected under 35 U.S.C. § 102 as anticipated by Sherman, Modular CPR Device, U.S. Patent 6,066,106 (May 23, 2000). Claim 8 is amended to include the claim limitation of a belt disposed around the patient and then around the spindle disposing the first spindle and second spindle between the belt and the patient. Sherman fails to disclose, teach or suggest disposing the first spindle and second spindle between the belt and the patient. In contrast to Sherman '106, the Applicant's spindles are used to direct compression force to maintain the thorax in a somewhat oval cross section when compressing the chest in the front to back direction. Claim 8 is further amended to claim the belt can compresses the chest of the patient with an anterior-posterior compression. Sherman does not disclose using an anteriorposterior compression,, but rather devices for circumferential chest compression. (see col. 3, lines 34 - 35). Because Sherman '106 fails to disclose at least one limitation claimed by the Applicant, Sherman does not anticipate the Applicant's claimed invention.

Conclusion

This response has addressed all of the Examiner's grounds for rejection. The rejections based on prior art have been traversed. Reconsideration of the rejections and allowance of the claims is requested.

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By:

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